Event Date: 07/20/2019

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Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full				
Yes We Can Columbus				
Full Name of Contributor			Registration Number, if PAC	
Will Easton				
Street Address	Employer/Occupation/Labor Organization*		zation*	Form (Cash, Check, etc.)
183 Northmoor Place	Email Strategist / Mozilla			Cash
City	State	Zip Code	Date	Amount
Columbus	OH	43214	07/20/2019	\$35.00
Full Name of Contributor			Registration Number, if PAC	
Ryan Yohe				
Street Address	Employer/0	Occupation/Labor Organi	zation*	Form (Cash, Check, etc.)
521 East Jenkins Avenue	Configuration Analyst / CoverMyMeds		lyMeds	Credit
City	State	Zip Code	Date	Amount
Columbus	ОН	43207	07/20/2019	\$10.00
Full Name of Contributor Registr			Registration Number, if	f PAC
Puja Datta				
Street Address	Employer/Occupation/Labor Organization*		ization*	Form (Cash, Check, etc.)
2305 Meadow village drive	Team lead / Equifax inc			Credit
City	State	Zip Code	Date	Amount
Columbus	ОН	43235	07/20/2019	\$20.00
Full Name of Contributor			Registration Number, if PAC	
Adam Parsons				
Street Address	Employer/Occupation/Labor Organization		ization*	Form (Cash, Check, etc.)
691 Frebis Ave	Data & Digital Director / Ohio Voice		Voice	Credit
City	State	Zip Code	Date	Amount
Columbus	ОН	43206	07/20/2019	\$20.00
Full Name of Contributor			Registration Number, if PAC	
Lindsey McEntee				
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)
1270 Giel Ave	Not Applicable / Not Applicable		e	Credit
City	State	Zip Code	Date	Amount
Lakewood	ОН	44107	07/20/2019	\$10.00
Full Name of Contributor			Registration Number, i	f PAC
Ryan Klein				
Street Address	Employer/	Occupation/Labor Organ	ization*	Form (Cash, Check, etc.)
916 e gay st	wholesaler / Nationwide			Credit
City	State	Zip Code	Date	Amount
Columbus	ОН	43203	07/20/2019	\$20.00
Full Name of Contributor			Registration Number, if PAC	
Jordan Grammer				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
415 Forest St	Business Analyst / L Brands			Credit
City	State	Zip Code	Date	Amount
Columbus	ОН	43206	07/20/2019	\$20.00

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state Contributions from form No. 31-E and list the date of the event in the date column

Total contributions this event Total expenditures this event

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.